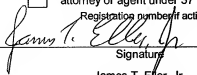


|   |                                  |   |  |
|---|----------------------------------|---|--|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2009</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>                                     |                                  | Docket Number (Optional)<br>3449-0587PUS1 |  |
| Application Number      10/565,832-Conf. #7309  |                                  | Filed                      July 17, 2006  |  |
| For      LED AND FABRICATION METHOD THEREOF   |                                  |   |  |
| Art Unit      2815  |                                  | Examiner      J. Jackson                  |  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |                                  |   |  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |                                  |   |  |
| <input checked="" type="checkbox"/>   | One month (37 CFR 1.17(a)(1))    | <u>Fee</u><br>\$130                       | <u>Small Entity Fee</u><br>\$65      \$ 130.00 |
| <input type="checkbox"/>  | Two months (37 CFR 1.17(a)(2))   | \$490                                     | \$245      \$ _____                            |
| <input type="checkbox"/>  | Three months (37 CFR 1.17(a)(3)) | \$1110                                    | \$555      \$ _____                            |
| <input type="checkbox"/>  | Four months (37 CFR 1.17(a)(4))  | \$1730                                    | \$865      \$ _____                            |
| <input type="checkbox"/>  | Five months (37 CFR 1.17(a)(5))  | \$2350                                    | \$1175      \$ _____                           |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.   |                                  |   |  |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |                                  |   |  |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |                                  |   |  |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |                                  |   |  |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> .                 |                                  |   |  |
| <b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.               |                                  |   |  |
| I am the <input type="checkbox"/> applicant/inventor.   |                                  |   |  |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.  |                                  |   |  |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |                                  |   |  |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>39,538</u>  |                                  |   |  |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.   |                                  |   |  |
| Registration number if acting under 37 CFR 1.34 _____   |                                  |   |  |
| <br>_____<br>Signature   |                                  | <u>September 28, 2009</u><br>Date         |  |
| James T. Eller, Jr.<br>Typed or printed name  |                                  | <u>(703) 205-8000</u><br>Telephone Number |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |                                  |   |  |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.   |                                  |   |  |